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529.45376X00

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ANTONELLI, TERRY STOUT & KRAUS, LLP 1300 NORTH SEVENTEENTH STREET **SUITE 1800** ARLINGTON, VA 22209-3873

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(Depositor's name) (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/550,615	09/26/2005	Kazuaki Hiramatsu	529.45376X00	5430	

TITLE OF INVENTION: HYDRAULIC PRESSURE ACTUATOR AND CONTINUOUS MANUAL ATHLETIC DEVICE USING THE SAME

Nonprovisional NO \$4469 1440 \$300 \$0 \$4700 1740 11/30/2007 EXAMINER	APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	JE PREV. PAID ISSUE FEE	TOTAL FEE (S) DUE	DATE DUE	
LESLIE, MICHAELS 3745 092-092000 1. Change of correspondence address or indication of "Fee Address: (37 CFE 1-38)). CPS 1-38). Change of correspondence address for Change of Correspondence Address from PTOSB (12) attained. Change of correspondence address for Change of Correspondence Address from PTOSB (12) attained. The Address' indication for "Fee Address' indication form PTOSB (12) attained to the Total Correspondence Address from PTOSB (12) attained. (2) the names of up to 3 registered patent attorneys 1 ANTONELLI, TERRY, STOUT 6 Address' indication for "Fee Address' indication form PTOSB (12) attained to the Total Correspondence Address from PTOSB (12) attained to the Total Correspondence	Nonprovisional	NO	\$1400 1440	\$300	\$0	\$ 1700 1740	11/30/2007	
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	CPR 1349), Chang of comespondence address (or Change of Correspondence Address from PTOS8/1/22) attached. Some PTOS8/1/22 attached. Free Address Indication (or Tee Address Indication form PTOS88/1/2; Ro Volzo or nore nearly address.)				(1) the names of up to 3 registered patient attorneys 1 ANTONELLI, TERRY, STOUT & KRAUS, LLP. Or agents OR, alternatively, (2) the name of single firm (having as a member a registered attorney or agent)			

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY) TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee Publication Fee (No small entity discount permitted) Advance Order-# of Copies 4

HITACHI MEDICAL CORPORATION

Payment of Fee (s): A check is enclosed. Payment by credit card. Form PTO-2038 is attached.

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5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application Identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Interest as shown by the records of the United States patent and Trademark Office

Authorized Signature /Paul J. Skwierawski/ _Date: OCTOBER 12. 2007

Typed or printed name Paul J. Skwierawski Registration No. 32,173

OMB 0851-0033

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and Submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent tot en Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.